

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Facility Information

Facility Name: SHAER RESIDENTIAL FACILITY (0010741)
Address: 213 W ALTALOMA CIRCLE, THIENSVILLE, WI 53092
License Status: REGULAR
Licensed/Certified/Registered 10/18/2004
Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5240

Survey History

Survey ID: 0096915 **End Date:** 04/17/2006 **Type:** OTHER **Purpose:** COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10007298 Served 05/22/2006

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.13(4)(a)	COMMUNICABLE DISEASE CONTROL		
83.15(1)(c)1	ADEQUATE STAFFING		

Survey ID: 0093538 **End Date:** 10/18/2004 **Type:** INITIAL **Purpose:** SURVEY

Results: LICENSE/CERT/REGISTRATION ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Enforcement History

Date: 05/15/2006 **SOD #**10007298 **Appealed:** No

Sanctions

COMPLY WITH REQUIREMENT
FORFEITURE---83.15(1)(c)1

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Complaint History

Date Complaint Received: 04/12/2006

Date Investigation Completed: 04/17/2006

Subject Area(s)

RESIDENT BEHAVIOR/FACILITY PRACTICE

Result

NOT SUBSTANTIATED

SOD #

Date Complaint Received: 03/10/2005

Date Investigation Completed: 04/17/2006

Subject Area(s)

RESIDENT BEHAVIOR/FACILITY PRACTICE
NUTRITION & FOOD SERVICES
ADMINISTRATION
QUALITY OF LIFE

Result

NOT SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

Date Complaint Received: 01/21/2005

Date Investigation Completed: 04/17/2006

Subject Area(s)

RESIDENT BEHAVIOR/FACILITY PRACTICE
PHYSICAL PLANTS & SAFETY HAZARDS
HOMELIKE ENVIRONMENT & CLEANLINESS

Result

NOT SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

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